Case 16-08047 Doc 1 Filed 03/08/16 Entered 03/08/16 18:15:38 Desc Main Document Page 1 of 56 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

IN RE:

Lopez, April

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors _____15

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: March 8, 2016

/s/ April Lopez
Debtor

Joint Debtor

 $_{B201B\;(Form\;2}\text{Case}_{18}, \text{Fe}_{19}, \text{6-}08047$

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Desc Main

Document Page 2 of 56 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

IN RE:		Case No.
Lopez, April		Chapter 7
	Debtor(s)	•

	2(b) OF THE BANKRUPTCY COI	· /
Certificate of [No	n-Attorney] Bankruptcy Petition Pr	reparer
I, the [non-attorney] bankruptcy petition preparer sign notice, as required by § 342(b) of the Bankruptcy Co		hat I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Address:	pet the pri	cial Security number (If the bankruptcy ition preparer is not an individual, state Social Security number of the officer, ncipal, responsible person, or partner of
X		bankruptcy petition preparer.) equired by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, partner whose Social Security number is provided about		
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received	and read the attached notice, as required	by § 342(b) of the Bankruptcy Code.
Lopez, April	X /s/ April Lopez	3/08/2016
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	x	
	Signature of Joint Debt	or (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in this inforn	mation to identify your	case:		
Debtor 1	April Lopez			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DIST	FRICT OF ILLINOIS, EASTERN DIVISION	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Statemer	nt of Intentic	n for Indiv	iduals Filing Under Chapte	er 7
	ividual filing under chap		out this form if:	
_	e claims secured by yo			
	sed personal property a		ot expired. Fou file your bankruptcy petition or by the date set f	or the meeting of creditors
whiche	ever is earlier, unless th		time for cause. You must also send copies to the c	
the forr	m			
•	eople are filing together te the form.	in a joint case, both	n are equally responsible for supplying correct info	rmation. Both debtors must sign
	and accurate as possibl our name and case nun		needed, attach a separate sheet to this form. On the	top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1. For any creditor information be		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Property (C	Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the property that	Did you claim the property
			secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of			☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of property			Agreement. ☐ Retain the property and [explain]:	
securing debt:			- Retain the property and [explain].	_
Creditor's name:			☐ Surrender the property.	□ No
name.			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of			Agreement.	
property			Retain the property and [explain]:	
securing debt:				-
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of			☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
property			Agreement. ☐ Retain the property and [explain]:	
securing debt:			- Recall the property and [explain].	

Official Form 108

Creditor's

☐ Surrender the property.

☐ No

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Debtor 1 Lopez, April	Case number (if known)	
name:	☐ Retain the property and redeem it.	☐ Yes
	☐ Retain the property and enter into a <i>Reaffirmation</i>	
Description of	Agreement.	
property	☐ Retain the property and [explain]:	
securing debt:	-	
Part 2: List Your Unexpired Personal Pro	onarty I ageas	
For any unexpired personal property lease the information below. Do not list real estate	that you listed in Schedule G: Executory Contracts and Unexpired L e leases. Unexpired leases are leases that are still in effect; the lease ty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	eases (Official Form 106G), fill in e period has not yet ended. You
Describe your unexpired personal property	y leases	Will the lease be assumed?
Lessor's name:		□ No
Description of leased		_
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased		_
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below		
	ve indicated my intention about any property of my estate that secur	res a debt and any personal
X /s/ April Lopez	X	
April Lopez	X Signature of Debtor 2	
Signature of Debtor 1		
Date March 8, 2016	Date	

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on your government-issued picture identification (for example, your driver's	April First name	First name
license or passport).	Middle name	Middle name
Bring your picture identification to your meetin with the trustee.	g Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years		
Include your married or maiden names.		
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6998	
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meetin with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. April First name Middle name Lopez Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number

Debtor 1 Lopez, April Document Page 6 of 56 Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
		EINs	EINs		
5.	Where you live	2823 Maple St	If Debtor 2 lives at a different address:		
		Franklin Park, IL 60131-3036 Number, Street, City, State & ZIP Code Cook County	Number, Street, City, State & ZIP Code County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Document Page 7 of 56 Case number (if known) Debtor 1 Lopez, April Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form The chapter of the Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ■ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District Case number District When Case number District When Case number 10. Are any bankruptcy cases ■ No pending or being filed by a spouse who is not filing Yes. this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

□ No.

Go to line 12

Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debt	Case 16-0)8047	Doc 1	Document	Page 8 of 56 Case number (if known)	Desc Main
art	3: Report About Any Bus	sinesses Y	ou Own as	a Sole Proprietor		
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Pa	rt 4.		
		☐ Yes.	Name an	d location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			business, if any		
If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City, State & ZIP Code				
	to this petition.		Check th	e appropriate box to descr	ribe your business:	
			П Н	lealth Care Business (as d	efined in 11 U.S.C. § 101(27A))	
			□ S	ingle Asset Real Estate (as	s defined in 11 U.S.C. § 101(51B))	
			□ S	tockbroker (as defined in 1	1 U.S.C. § 101(53A))	
				commodity Broker (as defin	ed in 11 U.S.C. § 101(6))	
				lone of the above		
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines. operations	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statements, and federal income tax return or if any of these documents do not exist, follow the process 1116(1)(B).			nt balance sheet, statement of
	For a definition of small	■ No.	I am not	filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing Code.	g under Chapter 11, but I a	am NOT a small business debtor according to	the definition in the Bankruptcy

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of Yes. imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

_	•	•0.	

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Debtor 1 Lopez, April Document Page 9 of 56 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 10 of 56 Case number (if known) Document Debtor 1 Lopez, April Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. ■ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ■ No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities to □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ April Lopez Signature of Debtor 2 April Lopez Signature of Debtor 1

Executed on

March 8, 2016 MM / DD / YYYY

Executed on

MM / DD / YYYY

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Document Debtor 1 Lopez, April

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ William S. Ryan	Date	March 8, 2016	
Signature of Attorney for Debtor		MM / DD / YYYY	
William S. Ryan			
Printed name			
William S. Ryan, Attorney at Law			
Firm name			
3101 Rose St			
Franklin Park, IL 60131-2713			
Number, Street, City, State & ZIP Code			
	-		
Contact phone	Email address	wr60131@aol.com	
Bar number & State			

Case 16-08047 Doc 1 Filed 03/08/16 Entered 03/08/16 18:15:38 Desc Main Document Page 12 of 56 Fill in this information to identify your case and this filing: Debtor 1 **April Lopez** Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? 1.1 What is the property? Check all that apply Single-family home Do not deduct secured claims or exemptions. Put 4400 Kolze Ave the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Street address, if available, or other description Condominium or cooperative Manufactured or mobile home

Current value of the Current value of the **Schiller Park** 60176-1607 IL Land entire property? portion you own? City State ZIP Code Investment property \$156,451.00 \$156,451.00 Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee Simple Debtor 1 only Cook Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

\$156,451.00

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debt	or 1 Lopez ,	April	Document Page 13 of 56	ase number (if known)	
3. Ca	rs, vans, trucks	s, tractors, sport util	lity vehicles, motorcycles		
	No				
	Yes				
3.1	Make: Hor		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any secu	claims or exemptions. Put ared claims on Schedule D: aims Secured by Property.
	Year: 200 Approximate mil		Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information	n:	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$5,466.00	\$5,466.00
5 A			ou own for all of your entries from Part 2, including any		\$5,466.00
Part 3	B: Describe You	r Personal and House	phold Items		
Do y	ou own or have	any legal or equita	ble interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> :			inens, china, kitchenware		
_	res. Describe.	Furniture			\$400.00
E)	•	ng cell phones, came	o, video, stereo, and digital equipment; computers, printers, eras, media players, games	scanners; music collections	s; electronic devices \$100.00
E)		es and figurines; paint ions, memorabilia, co	tings, prints, or other artwork; books, pictures, or other art of ollectibles	bjects; stamp, coin, or base	ball card collections; other
E) ■		nents	se, and other hobby equipment; bicycles, pool tables, golf cl	lubs, skis; canoes and kaya	ks; carpentry tools; musica
10. F i	irearms	s, rifles, shotguns, ar	mmunition, and related equipment		

De	ebtor 1	Case 16		Doc 1)3/08/16 iment	Entered 03 Page 14 of	3/08/16 18:15:38 56 Case number (if known)	Desc Main
	Clothes Example	,		, leather coats,	designer w	ear, shoes, ac	ccessories		
		Describe	Clothi	ng					\$100.00
12.	Jewelry Example		ewelry, cost	ume jewelry, en	gagement r	ings, wedding	g rings, heirloom je	welry, watches, gems, gold,	silver
	☐ Yes.	Describe							
	Example No	m animals les: Dogs, cats Describe	s, birds, hors	ses					
14.	Any oth ■ No	ner personal a	nd househ	old items you	did not alr	eady list, inc	cluding any healtl	n aids you did not list	
	☐ Yes.	Give specific in	nformation						
15				our entries fro				es you have attached for	\$600.00
Pa	rt 4: Des	scribe Your Fina	ancial Assets	S					
Do	you ow	n or have any	legal or ed	quitable interes	st in any o	f the followir	ng?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No		-				box, and on hand v	when you file your petition	
	☐ Yes								
17.	Examp	0.	•				deposit; shares in citution, list each.	redit unions, brokerage hou	ses, and other similar
	□ No ■ Yes					Institution n	ame:		
			17.1.	Checking A	Account	JPMorgai	n Chase Bank,	N.A.	\$500.00
			47.0	Cavinga As		IDMorgo	o Chaoa Bank	NI A	¢20.00
			17.2.	Savings Ac	count	JPINIORGAI	n Chase Bank,	N.A.	\$30.00
				y traded stock nt accounts with		firms, money	market accounts		
				Institution or is	suer name	:			
	joint ve		stock and i	nterests in inc	orporated	and unincor	porated business	ses, including an interest	n an LLC, partnership, and
	■ No □ Yes.	Give specific i		about them ne of entity:				% of ownership:	
20.	Negotia	able instrument	ts include pe	ersonal checks,	cashiers' c	hecks, promis	gotiable instrumerssory notes, and m	oney orders.	

Official Form 106A/B Schedule A/B: Property page 3

■ No

		Case 10)-U6U4 <i>1</i>	DOC 1		ment		15 of 5	6 09/10 10	0.13.30	Desc	IVIAIII
De	ebtor 1	Lopez, Ap	ril			IIIICIIL	raye .	_	Case numb	ber (if known)		
	☐ Yes. 0	Give specific ir		out them r name:								
21.		nent or pension les: Interests i		, Keogh, 401	(k), 403(b),	thrift savings	s accounts	, or other p	ension or pr	rofit-sharing រុ	olans	
	Yes. I	_ist each acco										
				account: or Similar	Dlan	Institution r	name:					\$48,000.00
_			401(K)	Oi Siiiiiai	riaii	4011						Ψ40,000.00
22.	Your sh	y deposits an nare of all unus les: Agreemen	ed deposits y	ou have made						s companies	, or others	
						Institution n	name or inc	dividual:				
23.	■ No	es (A contract	·			, either for life	e or for a n	umber of ye	ears)			
	☐ Yes		Issuer name	and descripti	on.							
24.		s in an educa C. §§ 530(b)(1)			a qualified	I ABLE prog	jram, or ur	nder a qua	alified state	tuition prog	ram.	
	☐ Yes		Institution na	me and descr	iption. Sepa	rately file the	records of	any interes	sts.11 U.S.C	. § 521(c):		
25.	Trusts,	equitable or f	future interes	sts in proper	ty (other th	nan anything	listed in l	line 1), and	d rights or p	oowers exer	cisable fo	r your benefit
	☐ Yes.	Give specific i	information al	out them								
26.		s, copyrights, les: Internet do							S			
	☐ Yes.	Give specific	information al	out them								
27.	_Examp	es, franchises les: Building p				association h	noldings, liq	quor license	es, professio	nal licenses		
	■ No □ Yes.	Give specific	information al	out them								
M	onev or i	oroperty owe	d to vou?								Cur	rent value of the
	, .										por Do	tion you own? not deduct secured ms or exemptions.
28.	Tax refo	unds owed to	you									
	_	Give specific ir	nformation abo	out them, inclu	uding wheth	er you alread	y filed the r	returns and	I the tax year	s		
29.	Family Examp	support <i>les:</i> Past due o	or lump sum a	ılimony, spou	ısal support	, child suppo	ort, mainten	nance, divo	orce settleme	ent, property	settlemen	t
		Give specific in	formation									
30.				insurance pa		ability benefi	ts, sick pay	y, vacation į	pay, workers	s' compensa	tion, Socia	al Security benefits;
	_	Give specific i	nformation									
31.		s in insuranc les: Health, dis	•	nsurance; he	alth savings	account (HS	SA); credit,	homeowne	er's, or renter	r's insurance		

	Case 16-08047	Doc 1	Filed 03/08/16 Document	Entered 03/08/16 18:15:38 Page 16 of 56_	Desc Main				
Debtor 1	Lopez, April			Case number (if known)					
☐ Yes.	☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary:								
If you died. No	terest in property that is do are the beneficiary of a living Give specific information			ance policy, or are currently entitled to receive p	property because someone has				
Exam ■ No	s against third parties, when ples: Accidents, employment Describe each claim			or made a demand for payment to sue					
■ No	contingent and unliquidate . Describe each claim	d claims of e	every nature, including	counterclaims of the debtor and rights to s	et off claims				
■ No	35. Any financial assets you did not already list ■ No □ Yes. Give specific information								
	the dollar value of all of yo 4. Write that number here			y entries for pages you have attached for	\$48,530.00				
Part 5: De	escribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.					
37 Do you	own or have any legal or equit	able interest i	n any business-related pr	operty?					
-	o to Part 6.		,						
_	Go to line 38.								
	escribe Any Farm- and Comme you own or have an interest in fa			or Have an Interest In.					
■ No.	u own or have any legal or . Go to Part 7. s. Go to line 47.	equitable int	erest in any farm- or co	ommercial fishing-related property?					
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Did	Not List Above					
Exam ■ No	u have other property of an ples: Season tickets, country Give specific information	club membe							

Official Form 106A/B Schedule A/B: Property page 5

\$0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here

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Case number (if known) Document

Debtor 1 Lopez, April

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$156,451.00
56.	Part 2: Total vehicles, line 5	\$5,466.00)	
57.	Part 3: Total personal and household items, line 15	\$600.00)	
58.	Part 4: Total financial assets, line 36	\$48,530.00		
59.	Part 5: Total business-related property, line 45	\$0.00	_)	
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00	_)	
61.	Part 7: Total other property not listed, line 54	+ \$0.00	<u> </u>	
62.	Total personal property. Add lines 56 through 61	\$54,596.00	Copy personal property total	\$54,596.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$211,047.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this informa	ation to identify your	case:		
Debtor 1	April Lopez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	SION
Case number				

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Part 1:	Identify the Property You Claim as Exempt
--	---------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
4400 Kolze Ave Schiller Park IL, 60176-1607	\$156,451.00	□ 100% of fair market value, up to	735 ILCS 5/12-901
County: Cook Line from Schedule A/B. 1.1		any applicable statutory limit	
Honda Civic	\$5,466.00		735 ILCS 5/12-1001(b)
2009		■ 100% of fair market value, up to	
60000 Line from <i>Schedule A/B</i> : 3.1		any applicable statutory limit	
Honda	\$5,466.00		735 ILCS 5/12-1001(c)
Civic 2009		100% of fair market value, up to	
60000		any applicable statutory limit	
Line from Schedule A/B: 3.1			
Furniture Line from Schedule A/B. 6.1	\$400.00	\$400.00	735 ILCS 5/12-1001(b)
LING HOLL COLOUGE FALL CIT		100% of fair market value, up to	

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	ief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	PMorgan Chase Bank, N.A.	\$500.00			735 ILCS 5/12-1001(b)			
LII	ie Irom Scriedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit				
	PMorgan Chase Bank, N.A.	\$30.00			735 ILCS 5/12-1001(b)			
LII	ne from <i>Schedule A/B</i> . 17.2			100% of fair market value, up to any applicable statutory limit				
	01K	\$48,000.00			735 ILCS 5/12-1006			
LII	ne from <i>Schedule A/B</i> . 21.1			100% of fair market value, up to any applicable statutory limit				
	Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) ■ No □ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? □ No □ Yes							

Case 16-08047 Doc 1 Filed 03/08/16 Entered 03/08/16 18:15:38 Desc Main Page 20 of 56 Document Fill in this information to identify your case: Debtor 1 **April Lopez** Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured portion much as possible, list the claims in alphabetical order according to the creditor 's name. Do not deduct the that supports this value of collateral. claim If any \$12,366.00 Chase Bank Describe the property that secures the claim: \$12,366.00 \$0.00 Creditor's Nam Attn: Bankruptcy PO Box 15298 As of the date you file, the claim is: Check all that Wilmington, DE 19850-5298 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number 5265 Chase Manhatton 2.2 \$156,451.00 \$10,325.00 \$166,776.00 Describe the property that secures the claim: Mortgage Creditor's Name 4400 Kolze Ave, Schiller Park, IL 60176-1607 3415 Vision Dr As of the date you file, the claim is: Check all that Columbus, OH 43219-6009 Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only

Date debt was incurred

At least one of the debtors and another ☐ Check if this claim relates to a

Debtor 1 and Debtor 2 only

community debt

Schedule D: Creditors Who Have Claims Secured by Property

7108

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

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Debtor	r1 April Lopez			Case number (if know)
	First Name	Middle Name	Last Name	
Add the	e dollar value of your e	ntries in Column A on th	is page. Write that number here	e: \$179,142.00
	s the last page of your hat number here:	form, add the dollar valu	e totals from all pages.	\$179,142.00
Part 2:	List Others to Be	Notified for a Debt Th	at You Already Listed	
trying t than or	to collect from you for	a debt you owe to somed ne debts that you listed in	one else, list the creditor in Part	that you already listed in Part 1. For example, if a collection agency is 1, and then list the collection agency here. Similarly, if you have more itors here. If you do not have additional persons to be notified for any
	Name, Number, Street, 0 Chase Mtg PO Box 24696 Columbus, OH 43			On which line in Part 1 did you enter the creditor?
,	Name, Number, Street, G Jpm Chase PO Box 24696 Columbus, OH 43			On which line in Part 1 did you enter the creditor?

		Document	Page 2	2 of 56		
Fill in this info	rmation to identify your	case:				
Debtor 1	April Lopez					
	First Name	Middle Name	Last Name		_ }	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
(Spouse II, IIIIIIg)	riist name	Middle Name	Lastivalle		j	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS, EAS	TERN DIVISION	_	
Case number					1	
(if known)						Check if this is an
					a	mended filing
Official For	m 106F/F					
		/ho Have Unsecured	Claime			12/15
		e Part 1 for creditors with PRIORIT		Part 2 for graditors with	NONDDIODITY clain	
creditors Who he Continuation ase number (if k	Have Claims Secured by Page to this page. If you ha	ired Leases (Official Form 106G). Droperty. If more space is needed, cove no information to report in a Par	opy the Part yo	ou need, fill it out, numl	ber the entries in the	boxes on the left. Attach
	itors have priority unsecure					
No. Go to		a ciamis agamst you.				
Yes.	Tait 2.					
	All of Your NONPRIORIT	Y Unsecured Claims				
	itors have nonpriority unse					
_ '		art. Submit this form to the court with	your other scho	odulos		
	lave nothing to report in this p	art. Submit this form to the court with	your other some	idules.		
Yes.						
unsecured cla	aim, list the creditor separatel	aims in the alphabetical order of th y for each claim. For each claim listed ist the other creditors in Part 3.If you h	l, identify what t	type of claim it is. Do not	list claims already incl	uded in Part 1. If more
						Total claim
4.1 Capita	al One	Last 4 digits of acc	count number	7590		\$8,985.00
Nonprior	rity Creditor's Name					*-,
	Bankruptcy ox 30285	When was the deb	t incurred?			-
	ake City, UT 84130-02	285				
Number	Street City State ZIp Code	As of the date you	file, the claim	is: Check all that apply		
	curred the debt? Check one.					
■ Debt	or 1 only	☐ Contingent				
☐ Debt	or 2 only	☐ Unliquidated				
☐ Debt	or 1 and Debtor 2 only	☐ Disputed				
☐ At lea	ast one of the debtors and an		RITY unsecure	d claim:		
☐ Ched	ck if this claim is for a com					
	aim subject to offset?	☐ Obligations arising report as priority cla		aration agreement or divo	orce that you did not	
■ No	•			ng plans, and other simila	ar debts	
☐ Yes		Other. Specify	•			
— 163		Other. Specify				_

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Lopez, Aprii	Case number (it know)	
Chase Card Services	Last 4 digits of account number 0045	\$3,750.00
Nonpriority Creditor's Name Attn: Correspondence Dept PO Box 15298	When was the debt incurred?	
Wilmington, DE 19850-5298		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Dept of Ed/Navient	Last 4 digits of account number 0917	\$12,648.00
Nonpriority Creditor's Name	When was the debt incurred?	, , , , , , , , , , , , , , , , , , , ,
Attn: Claims Dept PO Box 9400	when was the debt incurred?	
Wilkes Barre, PA 18773-9400		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
Dept of Ed/Navient	Last 4 digits of account number 0906	\$11,901.00
Nonpriority Creditor's Name Attn: Claims Dept	When was the debt incurred?	
PO Box 9400 Wilkes Barre, PA 18773-9400		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

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Debic	Lopez, Aprii	Case number (it know)	
4.5	Dept of Ed/Navient	Last 4 digits of account number 1011	\$11,433.00
	Nonpriority Creditor's Name Attn: Claims Dept PO Box 9400	When was the debt incurred?	
	Wilkes Barre, PA 18773-9400		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Discover Financial	Last 4 digits of account number 2163	\$6,395.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 3025	When was the debt incurred?	¥ 3,0 2 3 3 2 5
	New Albany, OH 43054-3025 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	Illinois Dep. of Employment		
4.7	Security	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	321 Quadrangle Dr Bolingbrook, IL 60440-3407		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Case number (f know)

Debtor	1 Lopez, April		Case number (f know)					
4.8	Ruin, Centracchio & Asset, LLC Nonpriority Creditor's Name	Last 4 digits of account num	ber	\$13,361.00				
	Nonpholity organors Name	When was the debt incurred	?					
	70 E Lake St # 500		·					
	Chicago, IL 60601-5990 Number Street City State Zlp Code	As of the date you file, the c	aim is: Check all that apply					
	Who incurred the debt? Check one.	no or the date you me, the o	ann io. Chook an mat apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt		separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	☐ Debts to pension or profit-s	haring plans, and other similar debts					
	Yes	Other. Specify						
4.9	Sears/Cbna	Last 4 digits of account num	ber 8036	\$8,260.00				
	Nonpriority Creditor's Name	When was the debt incurred						
	PO Box 6282	when was the debt incurred	-					
	Sioux Falls, SD 57117-6282							
	Number Street City State ZIp Code	As of the date you file, the c	aim is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:					
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a report as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not					
	■ No		☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	_						
	Li les	Other. Specify						
Part 3:	List Others to Be Notified About a De	bt That You Already Listed						
is tryi have notifi	ing to collect from you for a debt you owe to s more than one creditor for any of the debts the ed for any debts in Parts 1 or 2, do not fill out	omeone else, list the original credit at you listed in Parts 1 or 2, list the or submit this page.	nat you already listed in Parts 1 or 2. For example or in Parts 1 or 2, then list the collection agency additional creditors here. If you do not have addi	here. Similarly, if you				
	nd Address al One Bank USA N	On which entry in Part 1 or Part 2 did Line 4.1 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Clair	me				
	Capital One Dr	Line 4.1 of (Check one).	Part 2: Creditors with Nonpriority Unsecured					
	nond, VA 23238-1119	Last 4 digits of account number		Ciaims				
		Last 4 digits of account number	7590					
	nd Address	On which entry in Part 1 or Part 2 die						
	e Card ox 15298	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Clair					
	ngton, DE 19850-5298		Part 2: Creditors with Nonpriority Unsecured	Claims				
		Last 4 digits of account number	0045					
	nd Address	On which entry in Part 1 or Part 2 die	· <u> </u>					
•	of Ed/Navient	Line <u>4.3</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Clair					
	ox 9635 s Barre, PA 18773-9635		Part 2: Creditors with Nonpriority Unsecured	Claims				
		Last 4 digits of account number	0917					
Name a	nd Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?					

Official Form 106 E/F

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Debtor 1 Lopez, April		Case number (if know)				
Dept of Ed/Navient PO Box 9635	Line 4.4 of (Check one):	Part 1: Creditors with Priority Unsecured Claims				
Wilkes Barre, PA 18773-9635		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number	0906				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
Dept of Ed/Navient	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 9635 Wilkes Barre, PA 18773-9635		Part 2: Creditors with Nonpriority Unsecured Claims				
William Starte, FA 10770 3000	Last 4 digits of account number	1011				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
Discover Fin Svcs LLC	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 15316 Wilmington, DE 19850-5316		Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number	2163				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
33.00
22.00
33.00

		DUGUILE	III PAUE / / ULSO	
Fill in this infor	mation to identify your	case:		
Debtor 1	April Lopez			
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Case 16-08047 Doc 1 Filed 03/08/16 Entered 03/08/16 18:15:38 Desc Main Page 28 of 56 Document Fill in this information to identify your case: Debtor 1 **April Lopez** Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ☐ No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com

Column 1: Your codebtor

Daniel Helms

4400 Kolze Ave

3.1

Name, Number, Street, City, State and ZIP Code

Schiller Park, IL 60176-1607

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Chase Manhatton Mortgage

Schedule D, line

☐ Schedule E/F, line

☐ Schedule G

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	in this information to identify your of									
Del	otor 1 April Lopez	Z			_					
	otor 2 buse, if filing)									
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS, EAST	ERN	_					
	se number		_			Check if	f this is:			
(lf kr	nown)					☐ An a		Ū		
_	W : 1 E 4001							nt showing f the follov	g postpetition of ving date:	chapter 13
0	fficial Form 106l					\overline{MM}	/ DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. T1: Describe Employment	ur spouse is not filing wit On the top of any additio	h you, do not include	informa	ation a	bout you	ır spous	se. If more	e space is ne	eded,
1.	Fill in your employment information.		Debtor 1			D	ebtor 2	or non-fil	ling spouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			☐ Emplo	yed		
	attach a separate page with information about additional employers.		☐ Not employed				☐ Not er	mployed		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name	Acierno Dental L	LC						
	Occupation may include student homemaker, if it applies.	Or Employer's address	129 S Roselle Ro Schaumburg, IL		-					
		How long employed the	nere? 3 month	s						
Pai	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the d	ate you file this form. If y	ou have nothing to repo	rt for an	y line, v	write \$0 in	the spa	ce. Includ	e your non-filii	ng spouse
	u or your non-filing spouse have mo ce, attach a separate sheet to this fo		bine the information for	all emplo	oyers fo	or that per	rson on t	he lines be	elow. If you ne	eed more
					F	For Debto	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	5,23	36.00	\$	N/A	-
3.	Estimate and list monthly over	time pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	5 236	00	\$	N/A	

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Debto	or 1	Lopez, April		Case	number (if known)			
				For	Debtor 1		Debtor 2 or filing spouse	
	Cop	by line 4 here	4.	\$	5,236.00	\$	N/A	
5.	l ict	all payroll deductions:						
J.		• •	Fo	æ	4 740 00	ď	NIZA	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	1,710.98 0.00	\$	N/A N/A	
	5c.	Voluntary contributions for retirement plans	5c.	ş ^Ψ -	0.00	\$—	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$-	0.00	\$-	N/A	
	5e.	Insurance	5e.	\$ -	0.00	\$ <u> </u>	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$-	N/A	
	5h.	Other deductions. Specify:	5h	+ \$ _		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	1,710.98	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,525.02	\$	N/A	
		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	¢	0.00	\$\$		
	8b.	Interest and dividends	8b.	\$-	0.00	\$ <u> </u>	N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$_ \$_	0.00	\$	N/A N/A	
	8h.	Other monthly income. Specify:	8h	+ \$ _	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$		3,525.02 + \$		N/A = \$ 3,55	25.02
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ιο. Φ		3,323.02 I V			23.02
	Stat Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avacify:	lepender		•		ile J. 11. +\$	0.00
		If the amount in the last column of line 10 to the amount in line 11. The restree that amount on the Summary of Schedules and Statistical Summary of Certain					Combined	25.02
13	Dον	you expect an increase or decrease within the year after you file this form	?				monthly inc	ome
		No.	-					
		Yes. Explain:						

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Fill i	n this information to identify your case:				
Debt			Che	ck if this is:	
				An amended filing	
Debt	tor 2			A supplement show expenses as of the	ring postpetition chapter 13 following date:
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILI EASTERN DIVISION	LINOIS,		MM / DD / YYYY	
Case	e number				
	nown)				
Of	ficial Form 106J				
Sc	chedule J: Your Expenses				12/1:
info	as complete and accurate as possible. If two married people a rmation. If more space is needed, attach another sheet to thi nown). Answer every question.				
Part					
1.	Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	es for Separate Householdo	of Debto	r 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	•	hip to	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Part					
expe	mate your expenses as of your bankruptcy filing date unless enses as of a date after the bankruptcy is filed. If this is a sul licable date.				
	ude expenses paid for with non-cash government assistance				
	ue of such assistance and have included it on Schedule I: You icial Form 106I.)	ur Income		Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	4. \$	·	1,000.00
	If not included in line 4:				
	4a. Real estate taxes		4a. S	 _	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. S		0.00
5	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as	home equity loans	4d. 9		0.00

Deptor 1 Lopez, April	Case number (if known)
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 180.00
6b. Water, sewer, garbage collection	6b. \$ 80.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 180.00
6d. Other. Specify:	6d. \$ 0.00
Food and housekeeping supplies	7. \$ 500.00
Childcare and children's education costs	8. \$ 0.00
Clothing, laundry, and dry cleaning	9. \$ 50.00
. Personal care products and services	10. \$ 30.00
. Medical and dental expenses	11. \$ 50.00
Transportation. Include gas, maintenance, bus or train fare.	12. \$ 300.00
Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and book	·
. Charitable contributions and religious donations	14. \$ 0.00
Insurance.	υ.ου
Do not include insurance deducted from your pay or included in lines 4	or 20.
15a. Life insurance	15a. \$ 0.00
15b. Health insurance	15b. \$ 390.00
15c. Vehicle insurance	15c. \$ 196.00
15d. Other insurance. Specify:	15d. \$ 0.00
. Taxes. Do not include taxes deducted from your pay or included in lines 4	
Specify: Installment or lease payments:	16. \$ 0.00
17a. Car payments for Vehicle 1	17a. \$ 0.00
17b. Car payments for Vehicle 2	17b. \$ 0.00
17c. Other. Specify:	17c. \$ 0.00
17d. Other. Specify:	17d. \$ 0.00
Your payments of alimony, maintenance, and support that you did	not report as
deducted from your pay on line 5, Schedule I, Your Income (Official	
Other payments you make to support others who do not live with y	
Specify:	19.
 Other real property expenses not included in lines 4 or 5 of this form 20a. Mortgages on other property 	20a. \$ 0.00
20b. Real estate taxes	20b. \$ 0.00
20c. Property, homeowner's, or renter's insurance	200. \$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ 50.00
20e. Homeowner's association or condominium dues	20e. \$ 0.00
. Other: Specify: Regular expenses from operation of busin profession	21. +\$ 13.00
Storage	+\$ 110.00
Vet	+\$ 90.00
Calculate your monthly expenses	
22a. Add lines 4 through 21.	\$ 3,319.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official	
	<u> </u>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$
. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 3,525.02
23b. Copy your monthly expenses from line 22c above.	23b\$ 3,319.00
OO - Cultimate many many the same are a few as a second like the	
 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c. \$ 206.02
The result is your monthly net income.	
Do you expect an increase or decrease in your expenses within the For example, do you expect to finish paying for your car loan within the year or do modification to the terms of your mortgage?	
No.	
☐ Yes. Explain here:	

page 2

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Fill in this info	ormation to identify your	case:			
Debtor 1	April Lopez				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN	DIVISION	
Case number (if known)					☐ Check if this is an amended filing
Official Fo	rm 106Dec				
Declara	ation About a	an Individual	Debtor's Sc	hedules	12/1
obtaining mon years, or both.		connection with a bankr			ent, concealing property, or or imprisonment for up to 20
Did you	pay or agree to pay some	one who is NOT an attorn	ey to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	. Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	nalty of perjury, I declare a	that I have read the summ	nary and schedules filed	with this declaration a	and
X /s/ A	pril Lopez		X		
April	I Lopez ature of Debtor 1		Signature of I	Debtor 2	

Date ____

Date March 8, 2016

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mation to identify your	case:			
April Lopez				
First Name	Middle Name	Last Name)	
First Name	Middle Name	Last Name		
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVI	/ISION	
			☐ Check if this is an amended filing	I
	April Lopez First Name	April Lopez First Name Middle Name First Name Middle Name	April Lopez First Name Middle Name Last Name First Name Middle Name Last Name	April Lopez First Name Middle Name Last Name First Name Middle Name Last Name ankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Check if this is an

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

-			
Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	156,451.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	54,596.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	211,047.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	179,142.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	77,233.00
	Your total liabilities	\$	256,375.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,525.02
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,319.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	her schedi	ules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a perpurpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.	ersonal, fa	mily, or household

- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Lopez, April Document Page 35 of 56 Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,236.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Bort 4 on Calcady la E/E against the fall and an	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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						_				
Fill	in this	information to identify yo	ur case:							
De	btor 1	April Lopez								
_		First Name	Middle Name		Last Name					
_	btor 2 ouse if, filin	g) First Name	Middle Name		Last Name					
Un	ited Stat	es Bankruptcy Court for the	e: NORTHERN DISTRIC	Γ OF ILLIN	IOIS, EASTERN DIV	ISION				
Case number (if known)							☐ Check if this is an amended filing			
St Be a	atem as comp ormation	plete and accurate as poss If more space is needed	Affairs for Indiv sible. If two married people I, attach a separate sheet to	are filing	together, both are e	qually responsible				
`		Answer every question. Give Details About Your N	Marital Status and Where Yo	ou Lived E	efore					
1.	What is	What is your current marital status?								
	_	arried ot married								
2.	During	the last 3 years, have yo	u lived anywhere other thar	n where yo	ou live now?					
	-									
	■ No		lived in the last 3 years. Do no	ot include v	where you live now					
		es. List all of the places you	lived in the last 5 years. Do no	or iniciade v	vilere you live now.					
	Debto	r 1 Prior Address:	Dates Debtor there	Dates Debtor 1 lived there		Debtor 2 Prior Address:		Dates Debtor 2 lived there		
3. stat			ever live with a spouse or le alifornia, Idaho, Louisiana, N							
	■ No		hedule H: Your Codebtors (C	official Forr	n 106H).					
Pai	rt 2	Explain the Sources of Yo	our Income							
4.	Fill in th	he total amount of income y	employment or from operation or received from all jobs and have income that you received	d all busine	esses, including part-	time activities.	ious calend	ar years?		
	■ No	o es. Fill in the details.								
	Debtor 1 Debtor 2					Debtor 2				
			Sources of income Check all that apply.	(befo	ss income ore deductions and oreions)	Sources of inco		Gross income (before deductions and exclusions)		

Case 16-08047 Doc 1 Filed 03/08/16 Entered 03/08/16 18:15:38 Desc Main Document Page 37 of 56 ase number (if known) Debtor 1 Lopez, April Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider Amount you Insider's Name and Address Reason for this payment Dates of payment Total amount still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

7.

Include payments on debts guaranteed or cosigned by an insider.

Yes. List all payments to an insider

Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, Case 16-08047 Doc 1 Filed 03/08/16 Entered 03/08/16 18:15:38 Desc Main Document Page 38 of 56

Del	btor 1 Lopez, April	Document	Case number	F (if known)	
	and contract disputes.				
	■ No □ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of the	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, foreclosed	l, garnished, attached, s	eized, or levied?
	■ No□ Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the
		Explain what happen	ed		property
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or financial ins	stitution, set off any am	ounts from your
	Creditor Name and Address	Describe the action the	ne creditor took	Date action was taken	Amoun
	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		erty in the possession of any	assignee for the benefit	or orealions, a
Pai	rt 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	otcy, did you give any gif	ts with a total value of more t	han \$600 per person?	
	Gifts with a total value of more than \$600 person	per Describe the gift	s	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cont		ts or contributions with a tota	al value of more than \$6	00 to any charity
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		ou contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankrupt or gambling?	tcy or since you filed for	bankruptcy, did you lose any	thing because of theft, t	ire, other disaster,
	■ No				
	☐ Yes. Fill in the details.				
	how the less securred	Describe any insurance of	coverage for the loss	Date of your loss	Value of property los

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

insurance claims on line 33 of Schedule A/B: Property.

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Case 16-08047 Desc Main Document Page 39 of 56 ase number (if known) Debtor 1 Lopez, April consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment or transferred transfer was payment Email or website address made Person Who Made the Payment, if Not You 0.00 \$800.00 William S. Ryan, Attorney at Law 3101 Rose St Franklin Park, IL 60131-2713 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of transferred payment Address transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) П Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance before instrument closed, sold, Address (Number, Street, City, State and ZIP account number closing or transfer Code) moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)

Who else had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

		Case 16-08047	Doc 1 F	Filed 03/08/16 Document	Entered 0 Page 40 of	03/08/16 18:15:38 f 56	Desc Main
Deb	tor 1	Lopez, April				Case number (if known)	
22.	Have	you stored property in a sto	orage unit or p	lace other than your	home within 1 y	rear before you filed for bar	ıkruptcy
	_	No					
		Yes. Fill in the details.					
		ne of Storage Facility ress (Number, Street, City, State ar	d ZIP Code)	Who else has or h to it? Address (Number, S and ZIP Code)		Describe the contents	Do you still have it?
Par	9:	Identify Property You Hold	or Control for	Someone Else			
23.	Do yo		erty that some	one else owns? Inclu	de any property	you borrowed from, are st	coring for, or hold in trust for
	= 1	No					
		Yes. Fill in the details.					
		ner's Name ress (Number, Street, City, State ar	ıd ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value
Par	10:	Give Details About Enviror	mental Inform	ation			
For t	he pu	ırpose of Part 10, the followi	ng definitions	apply:			
	toxic		erial into the a	ir, land, soil, surface			, releases of hazardous or uding statutes or regulations
_	controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	mate	rial, pollutant, contaminant,	or similar term	n.			
Repo	ort all	notices, releases, and proc	eedings that yo	ou know about, regar	dless of when t	hey occurred.	
24.	Has a	any governmental unit notifi	ed you that yo	ou may be liable or po	tentially liable ι	under or in violation of an e	nvironmental law?
	_	No					
		Yes. Fill in the details.		Covernmental un	:4	Environmental law if y	You Date of notice
		ne of site ress (Number, Street, City, State ar	d ZIP Code)	Governmental un Address (Number, S ZIP Code)		Environmental law, if y know it	you Date of notice
25.	Have	you notified any governme	ntal unit of any	y release of hazardou	s material?		
	_	No Yes. Fill in the details.					
		ne of site ress (Number, Street, City, State ar	nd ZIP Code)	Governmental un Address (Number, S		Environmental law, if y know it	you Date of notice
				ZIP Code)			
26.	Have	you been a party in any jud	icial or admini	strative proceeding t	inder any enviro	onmental law? Include setti	ements and orders.
	_	No Yes. Fill in the details.					
		Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)		Nature of the case	Status of the case
Par	11:	Give Details About Your B	usiness or Cor	nnections to Any Bus	iness		
27.	Withi	in 4 years before you filed fo	or bankruptev	did you own a busing	ess or have any	of the following connection	ns to any business?
		☐ A sole proprietor or self-		•	•	· ·	is any business:
		☐ A member of a limited lia			•	•	

Case 16-08047 Doc 1 Filed 03/08/16 Entered 03/08/16 18:15:38 Document Page 41 of 56 ase number (if known) Debtor 1 Lopez, April ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ April Lopez Signature of Debtor 2 April Lopez Signature of Debtor 1 Date Date March 8, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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					_			
Fill	in this information to	identify you	ur case:			Check the approp	oriate box as	directed in
Deb	otor 1 April Lop	ez				lines 40 or 42:		
	otor 2					According to the	calculations red	quired by this
(Spo	ouse, if filing)					Statement.		
Unit	ted States Bankruptcy C	ourt for the:	Northern District of Illi Division	nois, Eastern		■ 1. There is no	presumption of	of abuse.
Cas	e number					☐ 2. There is a p	presumption of	abuse.
(if kı	nown)				J L			
~						Check if this is	an amended	filing
	ficial Form 122	_	_					
Ch	apter 7 Mear	is Test	Calculation					12/1
To fi	II out this form, you wi	ll need vour	completed copy of Ch	napter 7 Statemen	t of Your Current M	onthly income (Off	icial Form 12	 2A-1).
. •			completion copy of a	apter / Gtaterner.	to roar carron in	yeee (e.		
	s complete and accura							
	eded, attach a separate your name and case r			ne number to which	ch additional inform	ation applies. On t	he top any ad	ditional pages,
	<u>·</u>	(
Part	t 1: Determine You	r Adjusted I	ncome					
1.	Conv your total curre	nt monthly i	income.	Copy line 11 fr	om Official Form 12	2Λ-1 hore->	\$	5,236.00
١.	copy your total curre	in monthly	income.	Copy line 11 ii	om omciai i om 12	ZA-1 11616=>	Ψ	3,230.00
2.	Did you fill out Colum	n B in Part	1 of Form 122A-1?					
	■ No. Fill in \$0 for th	ne total on lin	ne 3.					
	☐ Yes. Is your spouse							
	□ No. Go to li							
		0 the total on	lino 2					
	□ res. Fillili φ	o trie total or	i iiie 3.					
3.			ome by subtracting any our dependents. Follow		use's income not us	sed to pay for the		
	On line 11, Column B of you or your dependents		1, was any amount of tl	ne income you repo	orted for your spouse I	NOT regularly used	for the househo	old expenses of
	■ No. Fill in 0 for the	total on line	. 3					
	☐ Yes. Fill in the info							
		manon bolo	•••					
	State each purp	ose for whi	ch the income was use	ed	Fill in the amou	ınt you		
	For example, the	income is us	sed to pay your spouse's	tax debt or to	are subtracting			
	support other tha	an you or you	r dependents.		your spouse's	income		
					\$			
					•			
	-				\$	<u>—</u>		
					\$			
	Total.				\$0.0	0		
						Copy total her	e=> ¢	0.00
						COP, LOTAL HEI		0.00
4.	Adjust your current n	nonthly inco	ome. Subtract line 3 from	m line 1.			\$	5,236.00

Official Form 122A-2

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Debtor 1 Lopez, April Case number (if known)

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1 Living 0 Housing

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

585.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ **60**
- 7b. Number of people who are under 65 X
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 60.00 Copy here=> \$ 60.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 144
- 7e. Number of people who are 65 or older X **0**
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00

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Debto	r 1	L	opez, A	nril	041	DUC		Docum			Page 44	of				Des	c main	
Debio			opez, A	фііі									Oase numb	ei (ii kiioii				
Lo	ocal	Sta	andards	You mu	st use th	ne IRS Lo	ocal Sta	ndards to	answe	er the c	questions in	lines	8-15.					
			n informa s into two		the IRS	S, the U.S	S. Trust	tee Progra	am has	s divid	ded the IRS	Loc	al Standa	ard for I	housing	for bankı	uptcy	
_			Ū	utilities - Ir utilities - N				g expense ses	es									
To	o an	swe	er the qu	estions in	n lines 8	8-9, use t	he U.S.	Trustee F	Progra	ım cha	art.							
				go online u o be availa					rate ins	structio	ons for this fo	orm.						
8.											ne number o enses					fill in \$_		485.00
9.	ı	Hou	sing and	d utilities -	Mortga	age or re	nt expe	enses:										
	(9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses																
	9b. Total average monthly payment for all mortgages and other debts secured by your home.																	
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.																	
			Name o	f the credit	tor					Averag payme	e monthly nt							
			Chase	Manhati	ton Mo	rtgage			\$	\$	2,779.6	0						
					Tota	al average	e monthl	ly payment	: \$	\$	2,779.6	0_	Copy here=>	-\$_	2	,779.60	Repeat this amount on line 33a.	
	Ş	9c.	Net mor	tgage or re	ent exper	nse.			L				J 			_		
			Subtrac rent exp	t line 9b (to bense). If th	o <i>tal avei</i> nis amoi	rage mon unt is less	nthly pay s than \$	<i>ymen)</i> from 60, enter \$0	n line 9 0	Эа (то	rtgage or		\$		0.00	Copy here=>	· \$	0.00
10											ocal Standar onal amoun			g is inc	orrect a	nd	\$	0.00
		Exp	olain why	:														
11	l. I	Loca	al transp								ich you claim				rating exp	pense.		
			-										·		- '			
			. Go to li															
			. Go to li	ne 12. . Go to line	<u>.</u> 12													

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

0.00

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Debtor 1	Lopez, April		Case number (if known)		
13.	Vehicle ownership or lease expense: Using the IRS Local S may not claim the expense if you do not make any loan or lease two vehicles.				
Vel	Describe Vehicle 1:				
13a.	Ownership or leasing costs using IRS Local Standard		\$0.00_		
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line 1 contractually due to each secured creditor in the 60 months after Then divide by 60.				
	Name of each creditor for Vehicle 1	Average monthly payment			
		\$			
	Total Average Monthly Payment	\$	Copy here => -\$ 0.	Repeat this amount on line 33b.	
	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0,	enter \$0	\$	Copy net Vehicle 1 expense here => \$	0.00
13d.	Ownership or leasing costs using IRS Local Standard		\$		
13e.	Average monthly payment for all debts secured by Vehicle 2. Deleased vehicles.	o not include costs for			
	Name of each creditor for Vehicle 2	Average monthly payment			
		\$			
	Total Average Monthly Payment	\$	Copy here => -\$	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$0,	enter \$0	\$	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles in transportation expense allowance regardless of whether you us			lic \$	185.00
15.	Additional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in what you more than the IRS Local Standard for Public Transportation.				0.00

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Debtor 1 Lopez, April Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.					
16.	self-employment taxes, Soc your pay for these taxes. Ho	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 and the total monthly amount that is withheld to pay for taxes.					
	Do not include real estate, s	ales, or use taxes.	\$	1,710.98			
17.	Involuntary deductions: Tunion dues, and uniform co	The total monthly payroll deductions that your job requires, such as retirement contributions, osts.					
	Do not include amounts tha	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00			
18.	together, include payments	nonthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00			
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.						
	Do not include payments o	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00			
20.	Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or						
	for your physically or me	ntally challenged dependent child if no public education is available for similar services.	\$	0.00			
21.	Childcare: The total month	ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.					
	Do not include payments fo	r any elementary or secondary school education.	\$	0.00			
22.	required for the health and	penses, excluding insurance costs: The monthly amount that you pay for health care that is welfare of you or your dependents and that is not reimbursed by insurance or paid by a health nly the amount that is more than the total entered in line 7.					
	Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	0.00			
23.	you and your dependents, s	elephone services: The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it imployer.					
		or basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00			
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expense allowances.	\$	3,025.98			

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Debtor 1 Lopez, April Case number (if known)

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.							
		Note: Do not include ar	ıy expense	allowances lis	eted in lines 6-24.			
25.		insurance, disability insurance, and health sance, disability insurance, and health savings accourdents.						
	Health	insurance	\$	0.00				
	Disabil	lity insurance	\$	0.00				
	Health	savings account	+ \$	0.00				
				-				
	Total		\$	0.00	Copy total here=>	\$	0.00	
	Do you actually spend this total amount?							
		No. How much do you actually spend?						
		Yes	\$		<u></u>			
26.	6. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b).							
27.	. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of							
	you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.							
	By law,	, the court must keep the nature of these expenses	confidentia	al.		\$	0.00	
28.	 Additional home energy costs. Your home energy costs are included in your non-mortgage housing and utilities allowance on line 8. 							
	-	pelieve that you have home energy costs that are mediate that you have home energy costs.	ore than the	e home energy	costs included in expenses on line 8,			
		ust give your case trustee documentation of your acd is reasonable and necessary.	tual expen	ses, and you r	must show that the additional amount	\$	0.00	
29.	\$156.2	tion expenses for dependent children who are 25* per child) that you pay for your dependent childr ntary or secondary school.						
		ust give your case trustee documentation of your acable and necessary and not already accounted for i		•	must explain why the amount claimed is			
	* Subje	ect to adjustment on 4/01/16, and every 3 years after	r that for c	ases begun or	n or after the date of adjustment.	\$	0.00	
30.	than th	onal food and clothing expense. The monthly an ne combined food and clothing allowances in the I nd and clothing allowances in the IRS National Sta	RS Nationa					
		I a chart showing the maximum additional allowance rm. This chart may also be available at the bankrupt			specified in the separate instructions for			
	You mu	ust show that the additional amount claimed is reas	onable and	l necessary.		\$	0.00	
31.		nuing charitable contributions. The amount that ments to a religious or charitable organization. 26 U.			bute in the form of cash or financial	+\$	0.00	
32.		Il of the additional expense deductions les 25 through 31.				\$	0.00	

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Debtor 1 Lopez, April Case number (if known)

Dedu	ctions for Debt Payment					
aı To	nd other secured debt, fill in lines 33a of calculate the total average monthly paym	ent, add all amounts that are contractually due			,	
th	ne 60 months after you file for bankruptcy. Mortgages on your home:	Then divide by 60.				verage monthly
33a.	Copy line 9b here			=>	, pa	2,779.60
	Loans on your first two vehicles				•	2,110.00
33b.	·			=>	\$	0.00
33c.					\$	0.00
33d.	List other secured debts:					
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes or insurance?		
				■ No		
	Chase Bank	Secured property		☐ Yes	\$	206.10
				- □ No	Ψ,	
				☐ Yes	æ	
		_			\$	
				□ No		
				☐ Yes	+\$	
33e.	Total average monthly payment. Add lin	es 33a through 33d	\$	2 095 70	Copy total here=>	\$2,985.70_
01		secured by your primary residence, a vehicle or the support of your dependents?	e, or			
		pay to a creditor, in addition to the payments ur property (called the <i>cure amount</i>). Next, divid				
Nam	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount
-NO	DNE-		\$	÷6	50 = \$	
		Tot	al \$	0.00	Copy total here=>	\$
	o you owe any priority claims such as re past due as of the filing date of you	a priority tax, child support, or alimony - th bankruptcy case? 11 U.S.C. § 507.	at			
	No. Go to line 36.					
	Yes. Fill in the total amount of all of the priority claims, such as those year	nese priority claims. Do not include current or outlisted in line 19.	ongoing			
	Total amount of all past-due pr	iority claims	\$	0.00 ÷	60 =	\$0.00

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Debtor 1	Lope	ez, April			Case no	umber (<i>if known</i>)			
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § 109 information, go online using the link fo <i>Bankruptcy Basics</i> as for this form. <i>Bankruptcy Basics</i> may also be available a	speci			ce.			
	No.	Go to line 37.							
	☐ Yes.	Fill in the following information.							
		Projected monthly plan payment if you were filing under Cl	hapte	r 13	\$				
		Current multiplier for your district as stated on the list issue Administrative Office of the United States Courts (for distand North Carolina) or by the Executive Office for United States all other districts).	tricts	in Alab					
		To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total							
		Average monthly administrative expense if you were filing	under	· Chapt	er 13	\$		\$	
		of the deductions for debt payment. s 33e through 36.						\$	2,985.70
Total	l Deduct	tions from Income							
38. A	dd all o	f the allowed deductions.							
		e 24,All of the expenses allowed under IRS e allowances	\$_		3,025.98				
	Copy lin	e 32, All of the additional expense deductions	\$_		0.00				
	Copy lin	e 37, All of the deductions for debt payment	+\$		2,985.70				
	Total de	ductions	\$_		6,011.68	Copy total	here=	> \$	6,011.68
Part 3:	Det	ermine Whether There is a Presumption of Abuse							
39. C	alculate	e monthly disposable income for 60 months							
	39a. Co	py line 4, adjusted current monthly income	\$		5,236.00				
	39b. Co	py line 38, <i>Total deductions</i>	-\$		6,011.68				
	39c. Mo	onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$_		0.00	Copy here=>\$		0.00	
	For the i	next 60 months (5 years)				J	x 60		
]		
	39d. To	tal. Multiply line 39c by 60		39d.	\$	0.00	Copy here=>	\$	0.00
40. F	ind out	whether there is a presumption of abuse. Check the bo	ox tha	ıt appli	L es:		I		
	■ The I	ine 39d is less than \$7,475*. On the top of page 1 of this	form,	check	box 1, There is	no presump	tion of abus	e. Go to Part	5.
		ine 39d is more than \$12,475*. On the top of page 1 of the claim special circumstances. Go to Part 5.	is forr	m, che	ck box 2, There	is a presum	ption of abu	se. You may	fill out Part 4
Г	_ ′	ine 39d is at least \$7,475*, but not more than \$12,475*.	Go to	o line 4	1.				
		to adjustment on 4/01/16, and every 3 years after that for ca				e of adjustme	ent.		
,	-unjuul 1	is as a surface of the first of the control of the			J. GILOI LIIC GAL	o or aujuotille	·· · · · ·		

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ebtor 1	Lop	ez, April	Ca	ase number (if known)	
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you fille Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form	1	a. \$ x .25	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A	A)(i)(1)	\$	Copy here=> \$
		Multiply line 41a by 0.25			
of	your i	ne whether the income you have left over after subtracting all allowed unsecured, nonpriority debt. e box that applies:	l deduc	ctions is enough to pay 2	25%
		39d is less than line 41b. On the top of page 1 of this form, check box 1, o Part 5.	There is	s no presumption of abuse	
		39d is equal to or more than line 41b. On the top of page 1 of this form, e. You may fill out Part 4 if you claim special circumstances. Then go to P		oox 2, There is a presumpt	ion of
Part 4:	Giv	ve Details About Special Circumstances			
		we any special circumstances that justify additional expenses or adjust alternative? 11 U.S.C. § 707(b)(2)(B).	stment	s of current monthly inc	ome for which there is no
= 1	No. Go	o to Part 5.			
□ '		Il in the following information. All figures should reflect your average monthly bu may include expenses you listed in line 25.	expens	se or income adjustment fo	or each item.
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation in the company of			
	G	Sive a detailed explanation of the special circumstances		verage monthly expense r income adjustment	
	_		_	\$	
	_		_	\$	_
	_		_	\$	
			_	\$	<u> </u>
Part 5:	Sic	gn Below			
	_	gning here, I declare under penalty of perjury that the information on this sta	tement	and in any attachments is	true and correct.
	X /s	/ April Lopez			
	Α	pril Lopez gnature of Debtor 1			
D		arch 8, 2016			
		M / DD / YYYY			

Certificate Number: 16485-ILN-CC-026717826



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 27, 2015</u>, at <u>7:24</u> o'clock <u>PM PST</u>, <u>April Lopez</u> received from <u>101creditcounseling.com</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Northern District of Illinois</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: December 27, 2015

By: /s/Jennifer L Walter

Name: Jennifer L Walter

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-08047 Doc 1 Filed 03/08/16 Entered 03/08/16 18:15:38 Desc Main Document Page 56 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In r	re Lopez, April		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COM	IPENSATION OF ATTO	ORNEY FOR I	EBTOR		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplat	filing of the petition in bankruptc	y, or agreed to be pai	d to me, for services re		
	For legal services, I have agreed to accept		\$	1,500.00		
	Prior to the filing of this statement I have receive			800.00		
	Balance Due		\$	700.00		
2. T	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. T	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed confirm.	ompensation with any other person	n unless they are mer	mbers and associates of	f my law	
	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				law firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules,c. Representation of the debtor at the meeting of cred. [Other provisions as needed]	statement of affairs and plan which	ch may be required;	•	cruptcy;	
6.	By agreement with the debtor(s), the above-disclose	d fee does not include the following	ng service:			
		CERTIFICATION				
this	I certify that the foregoing is a complete statement obankruptcy proceeding.	f any agreement or arrangement for	or payment to me for	representation of the d	lebtor(s) in	
ı	March 8, 2016	/s/ William S. Rya	an			
Date		William S. Ryan				
		Signature of Attorn William S. Ryan,				
		3101 Rose St				
		Franklin Park, IL	60131-2713			
		wr60131@aol.co	m			
		Name of law firm				